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PTO/SB/17 (10-07)
Approved for use through 06/30/2010. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL For FY 2008		Complete if Known		
		Application Number	10/713,336	
		Filing Date	November 13, 2003	
		First Named Inventor	Paul Ashton	
		Examiner Name	H. N. Sheikh	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	Art Unit	1615		
TOTAL AMOUNT OF PAYMENT	(\$)	590.00	Attorney Docket No.	CDSI-P01-030

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 18-1945 Deposit Account Name: Ropes & Gray LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	210	105
Multiple dependent claims	370	185

Total Claims 27 - 38 = x = **Fee Paid (\$)**

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims 1 - 11 = x = **Fee Paid (\$)**

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>

4. OTHER FEE(S)

	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): 2253 Extension for response within third month	525.00
2814 Statutory Disclaimer	65.00

SUBMITTED BY			
Signature	<i>Maya Escobar</i>	Registration No. (Attorney/Agent)	56,346
Name (Print/Type)	Maya Escobar, Ph.D.	Telephone	(617) 951-7173
		Date	June 16, 2008

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: 6/16/08 Signature: Valerie J. Sarosky (Valerie J. Sarosky)



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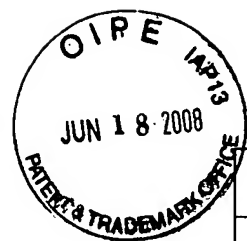
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEE TRANSMITTAL For FY 2008		Application Number	10/713,336
		Filing Date	November 13, 2003
		First Named Inventor	Paul Ashton
		Examiner Name	H. N. Sheikh
		Art Unit	1615
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	Attorney Docket No.	CDSI-P01-030	
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<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: 18-1945
Deposit Account Name: Ropes & Gray LLP	
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<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

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1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
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Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
27		- 38 =	x	=	Fee (\$)		Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20.							
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Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)		
- 100 =	/50 =	(round up to a whole number) x		=			
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 2253 Extension for response within third month						525.00	
2814 Statutory Disclaimer						65.00	

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	56,346
Name (Print/Type)	Maya Escobar, Ph.D.	Telephone	(617) 951-7173
		Date	June 16, 2008

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Dated: 6/16/08	Signature: (Valerie J. Sarosky)

**AMENDMENT TRANSMITTAL LETTER**Docket No.
CDSI-P01-030Application No.
10/713,336Filing Date
November 13, 2003Examiner
H. N. SheikhArt Unit
1615

Applicant(s): Ashton et al.

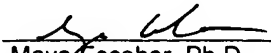
Invention: SYSTEMIC DELIVERY OF ANTIVIRAL AGENTS

TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	27	- 38 =		x	
Independent Claims	1	- 11 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within third month; Statutory Disclaimer					590.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					590.00

☐ Large Entity☒ Small Entity☐ No additional fee is required for this amendment.☒ Please charge Deposit Account No. 18-1945 in the amount of \$ 590.00.
A duplicate copy of this sheet is enclosed.☐ A check in the amount of \$ _____ to cover the filing fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge and credit Deposit Account No. 18-1945
as described below. A duplicate copy of this sheet is enclosed.☒ Credit any overpayment.☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.
Maya Escobar, Ph.D.
Attorney/Agent Reg. No.: 56,346Dated: June 16, 2008ROPES & GRAY LLP
One International Place
Boston, Massachusetts 02110
(617) 951-7173

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Dated: 6/16/08Signature:  (Valerie J. Sarosky)



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AMENDMENT TRANSMITTAL LETTER				Docket No. CDSI-P01-030	
Application No. 10/713,336	Filing Date November 13, 2003	Examiner H. N. Sheikh	Art Unit 1615		
Applicant(s): Ashton et al.					
Invention: SYSTEMIC DELIVERY OF ANTIVIRAL AGENTS					
TO THE COMMISSIONER FOR PATENTS					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	27	- 38 =		x	
Independent Claims	1	- 11 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within third month; Statutory Disclaimer					590.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					590.00
<input type="checkbox"/> Large Entity <input checked="" type="checkbox"/> Small Entity					
<input type="checkbox"/> No additional fee is required for this amendment.					
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<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
_____ Maya Escobar, Ph.D. Attorney/Agent Reg. No.: 56,346 ROPES & GRAY LLP One International Place Boston, Massachusetts 02110 (617) 951-7173				Dated: <u>June 16, 2008</u>	
<small>I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</small>					
Dated: <u>6/16/08</u> Signature: <u>Valerie J. Sarosky</u> (Valerie J. Sarosky)					